

# FREE STATE RANGERS APPLICATION FOR MEMBERSHIP

Application is hereby made for membership in the Free State Rangers Single Action Shooting Club. Membership fees are \$30.00 for an individual and \$40.00 for a family. Family members must reside in the home of the primary applicant to qualify for family membership. Please provide the following information. Write legibly and return the forms to Buffalo Phil or O.D. Cleaver, with your payment, as soon as possible. If we do not have a Release from Liability form signed by you already on file, we will notify you and send you a form to sign.

NEW MEMBER \_\_\_\_\_ RENEWAL \_\_\_\_\_

Year \_\_\_\_\_

Primary Member's Name \_\_\_\_\_  
Alias \_\_\_\_\_

Family Members' Names \_\_\_\_\_  
Alias \_\_\_\_\_

(If more space is necessary, use reverse side)

Mailing  
Address \_\_\_\_\_  
Street or PO Box                      City                      State      ZIP code

Phone Number \_\_\_\_\_ E-mailAddress \_\_\_\_\_

NRA Number (required for membership, but not to shoot) \_\_\_\_\_

S.A.S.S.  
Number(s) \_\_\_\_\_

Thank you for supporting your shooting club.